

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Facility Information**

**Facility Name:** GABLES ON THE POND (410556)

**Address:** 305 S SPRING ST, RANDOM LAKE, WI 53075

**License Status:** REGULAR

**Licensed/Certified/Registered** 04/01/2000

**Regional Office:** NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

**Survey History**

**Survey ID:** 0094268      **End Date:** 03/09/2005      **Type:** OTHER      **Purpose:** COMPLAINT/SELF REPORT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0092770      **End Date:** 06/02/2004      **Type:** ABBREVIATED      **Purpose:** SURVEY/COMPLAINT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #10006976    Served 06/19/2004

Deficiencies Cited  
83.21(4)(n)4

Subject Area  
FREE FROM PHYSICAL RESTRAINTS

Compliance  
Verified  
03/09/2005

Corrected  
Yes

*Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.*

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Complaint History**

**Date Complaint Received: 09/30/2004**

**Date Investigation Completed: 03/09/2005**

Subject Area(s)

MEDICATIONS  
STAFF ADEQUACY  
PROGRAM SERVICES

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 10/14/2003**

**Date Investigation Completed: 06/02/2004**

Subject Area(s)

PHYSICAL PLANTS & SAFETY HAZARDS  
MEDICATIONS  
ADMINISTRATION  
STAFF ADEQUACY  
PROGRAM SERVICES

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

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